

1340 Hamlet Avenue
Clearwater, FL
33756-3332
727.443.5656
727.443.4888 f



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2014 APR -2 AM 9:52
FEC MAIL CENTER

March 27, 2014

Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

Re: Statement of Organization – QSR Leaders Political Action Committee, Inc.

Dear Sir/Madam:

Enclosed please find a fully executed FED Form 1 in accordance with the above-noted transaction.

Please send a confirming letter along with the unique FED Identification Number. Should you have any questions, or require anything further, please do not hesitate to contact me. Thank you.

Best regards,



Jessica Hill

14031202535

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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Office Use Only

1. NAME OF
COMMITTEE (In full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

QSR Leaders Political Action Committee, Inc.

ADDRESS (number and street)

1340 Hamlet Avenue

☐

(Check if address
is changed)

Clearwater

FL

33756

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐

(Check if address
is changed)

bzonies@theborder.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐

(Check if address
is changed)

2. DATE 03 ' 27 ' 2014

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

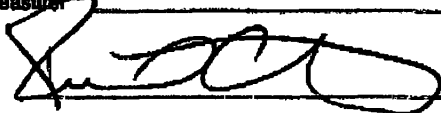
AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Bob Zonies

Signature of Treasurer



Date

03 ' 27 ' 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2008)

Candidate Committee:

- Name of Candidate**

Office Sought:

Senate

President

State

District

- Name of Candidate

(d) ☐ This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

(e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

- | | | |
|--|--|---|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Corporation w/o Capital Stock | <input type="checkbox"/> Labor Organization |
| <input type="checkbox"/> Membership Organization | <input type="checkbox"/> Trade Association | <input type="checkbox"/> Cooperative |

☐ In addition, this committee is a Lobbyist/Registrant PAC.

- (f) ☒ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 8.)

(g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

1. _____ FEC ID number C

1. _____ FEC ID number C

[illegible]

3. _____ FEC ID number C

FEC ID number C

Write or Type Committee Name

QSR Leaders Political Action Committee, Inc.

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Bob Zonies

Mailing Address

1340 Hamlet Avenue**Clearwater****FL****33756**

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

727**- 443****- 5656**

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer**Bob Zonies**

Mailing Address

1340 Hamlet Avenue**Clearwater****FL**

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number

727**- 443****- 5656**

14031202538

Full Name of
Designated
Agent

Wiley Turner

Mailing Address

1340 Hamlet Avenue

Clearwater

CITY

FL

STATE

33756

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

727

- 443

- 5656

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

FIFTH THIRD BANK

Mailing Address

201 EAST KENNEDY BLVD SUITE 1800

TAMPA

CITY

FL

STATE

33602

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

14031202539

14031202540

Jessica Hill
1340 Hamlet Avenue
Clearwater, FL 33756



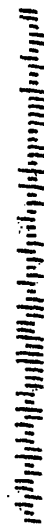
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Washington, DC 20463

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20463



Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS First Class Mail	Postmarked
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<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 3/27/14
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<input type="checkbox"/> USPS Priority Mail	Postmarked
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
---	------------

<input type="checkbox"/> Postmark Illegible	
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<input type="checkbox"/> No Postmark	
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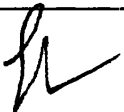
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>

<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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 PREPARER	4/2/14 DATE PREPARED
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(8/2013)

14031202541